PART B - FEE(S) TRANSMITTAL

FIRST NAMED INVENTOR

Akio SUGIHARA

PUBLICATION

FEE

TITLE OF INVENTION: COMPOSITION OF SOLIFENACIN OR SALT THEREOF FOR USE IN SOLID FORMULATION

ISSUE FEE

FILING DATE

09/25/2006

WASHINGTON DC SUGHRUE/265550

65565 CUSTOMER NUMBER

APPLICATION NO.

10/594.127

APPLN, TYPE

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800

SMALL

ENTITY

WASHINGTON, DC 20037

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

TOTAL FEE(S)

DUE

ATTORNEY DOCKET NO.

097391

PREV. PAID ISSUE FEE

CONFIRMATION NO.

8975

DATE DUE

nonprovisional	NO	\$1510.00	\$0.00		\$1,510.00	\$0.00	05/07/2011	
EXAMINER			ART UNIT		CLASS-SUBCLASS			
Niloofar RAHMANI			1625		514-305000			
1. Change of correspond	lence address or ind	lication of "Fee Address"	(37 CFR 1.363	2. For pri	nting on the patent from	page list	1 Sughrue Mion, PLLC	
☐ Change of correspon PTO/SB/122) attached.	e Address form	dress form (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2			2			
☐ "Fee Address" indic 03-02 or more recent) /								
3. ASSIGNEE NAME.	AND RESIDENCE	DATA TO BE PRINTE	D ON THE PAT	ENT (prin	t or type)			
		entified below, no assign empletion of this form is				dentified below, t	he document has been filed for	
(A) NAME OF ASSIG	NEE (B) RESI	DENCE: (CITY and ST	ATE OR COUNT	TRY)				
Astellas Pharma Inc.	Tokyo, Ja	apan						
		gory or categories (will n					ate group entity Government	
4a. The following fee(s	4b. Paymer	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee			☐ A check is enclosed.					
☐ Publication Fee (No small entity discount permitted)			☐ Payment	□ Payment by credit card. Form I310-2038 is attached.				
☐ Advance Order - # of Copies			□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880.					
					ected and authorized to credit any overpayments		ed fees to Deposit Account No. Account.	
5. Change in Entity Sta	us (from status ind	icated above)						
a. Applicant claims SM	IALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applie	cant is no l	onger claiming SMALL	ENTITY status.	See 37 CFR 1.27(g)(2).	
previously paid	issue fee to th	e application ide	ntified abov	e.		`	y) or to re-apply any	
party in interest as show	n by the records of	f the United States Paten	t and Trademark (Office.				
Authorized Signature	Authorized Signature /Jennifer M. Hayes/		Date		May 6, 2011			
Typed or Printed Name		Jennifer M. Hayes		Registrat	ion No.	40,641		
Modified PTOL-85 (Re	v. 08/08 Approved	for use through 08/31/20	010.					